

# Commonwealth of Massachusetts Petition for Admission to the Bar COVER SHEET Reapplication

### Supreme Judicial Court for Suffolk County John Adams Courthouse

John Adams Courthouse One Pemberton Square, Suite 1300 Boston, MA 02108-1707

Complete and F Full Name:	ile with your Bar Application. Res	ponses are MANDAI OI	M1.
run ivaine.			
Last Name	First Name		Middle or Initial
Address	City	State	Zip Code
(Day) Telephone (Even	ning) Telephone	E-Mail Address	
Social Security No. (Not available to the public	Date of Birth (##/####)	Place of Birth: (City	y, State, Country)
When did you last apply for the Massachuset	ts Bar Exam? (Mo./Yr.)	When did you take t	the MPRE? (Mo./Yr.)
	, ,	filing with this man	ndatory Cover Sheet.
You MUST indicate (X) the (Documents are NOT)  PETITION FOR ADMIS	the jet requisite documents you are a ACCEPTED separately. All of the SION (Pages 1-2) requiring y	filing with this man locuments MUST be f	adatory Cover Sheet. Filed together.)
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### Commonwealth of Massachusetts

### **Supreme Judicial Court for Suffolk County**

#### REAPPLICATION

### INFORMATION FOR THE FEBRUARY 2007 MASSACHUSETTS BAR EXAMINATION

Eligibility: Supreme Judicial Court Rule 3:01, §3, establishes eligibility. See Massachusetts Rules of Court

**Filing Instructions:** Complete Application must be filed by **December 15, 2006, deadline** at:

**Supreme Judicial Court for Suffolk County** 

Clerk Maura S. Doyle's Office

**One Pemberton Square** 

John Adams Courthouse, Suite 1300

Boston, MA 02108-1707

Any delivery method is acceptable provided the application is received (not postmarked) by

December 15, 2006. See the following page for Filing Requirements.

Filing Deadline: December 15, 2006

**Notification:** Those applicants found eligible to sit will receive site, seating and other pertinent information from the Board

of Bar Examiners approximately 2-3 weeks prior to the examination. **THERE IS NO ADMISSION** 

TICKET.

<u>Time and Place:</u> Wednesday and Thursday, February 28 and March 1, 2007, at the World Trade Center/Seaport Hotel, Seaport

Boulevard, Boston, MA 02210, 617-385-4000. Public transportation and parking is available. For lodging,

call the Office of Travel & Tourism: 1-800-447-MASS or www.massvacation.com.

Alternate Site: The exam will also be held at Western New England College School of Law in Springfield, MA.

• To sit in Springfield, you must be sitting BOTH days in Massachusetts and submit the <u>Springfield Seating Request Form</u> (available online and at the office of the Board of Bar Examiners) to the Board of Bar Examiners (do not submit with your bar application).

- Further, to be eligible to sit in Springfield, applicants must file a timely application (*on or before December 15, 2006*) at the Clerk's Office. Application must be complete at the time of filing to be considered.
- All applicants will sit in Boston, unless the Board of Bar Examiners allows the request for the Alternate Site
- Seating is limited and based on a first come, first served basis forms may be mailed prior to filing an application at the Clerk's Office.
- The Springfield form <u>must be submitted</u> to the **Board of Bar Examiners** by the **December 15, 2006**, **deadline** at:

Board of Bar Examiners
Suffolk County Courthouse
3 Pemberton Square - Room 707
Boston, MA 02108

#### **Nonstandard Testing:**

- If you have a disability that will require nonstandard testing accommodations on the bar examination, you must complete and file the <u>Nonstandard Testing Accommodations (NTA) Application</u> forms available at the Board's office or on the Board's web site: www.mass.gov/bbe.
- Both the applicant and professionals must complete these forms to provide the Board with details and documentation relating to the disability.
- The Nonstandard Testing Accommodations Application must be submitted <u>in duplicate</u> to the Board on or before **December 15, 2006.**
- If the Board of Bar Examiners previously granted testing accommodations for the Massachusetts Bar Examination to you within the past three years and you are asking for the same accommodations, you must send a letter requesting the same accommodations as previously granted to the Board of Bar Examiners, Suffolk County Courthouse, 3 Pemberton Square Room 707, Boston, MA 02108 by **December 15, 2006.**
- If you are requesting additional accommodations, a new Nonstandard Testing Accommodations Application must be filed with the Board.
- DO NOT SUBMIT YOUR NONSTANDARD TESTING ACCOMMODATIONS APPLICATION TO THE COURT.

# Commonwealth of Massachusetts BAR EXAMINATION APPLICATION FILING REQUIREMENTS

Below you will find the list of required materials mandated for filing the Reapplication. Any application that does not include these requisite materials is incomplete and unacceptable for filing.

### **Complete Application**:

- Petition Cover Sheet
- **Petition to the Court** requiring your original signature and an original signature by the recommending attorney (pgs 1-2).
- Applicant's statement to the Board of Bar Examiners (pgs 3-6) requiring your original signature.
- **Authorization Form** requiring your original signature (pg 7).
- Law School Certificate completed by your graduating law school <u>if</u> you have not previously submitted a law school certificate.
- Multistate Professional Responsibility Examination (MPRE) Score Report: Showing a scaled score of 85 or greater. The Score Report (an official or unofficial Report is acceptable) must be attached. The MPRE is administered by the National Conference of Bar Examiners and is given three times per year, in March, August, and November. For an application, call (319) 341-2500; for a copy of your Score Report, call (319) 337-1304; or visit the National Conference of Bar Examiners' web site at: www.ncbex.org (link to MPRE)
- Certificate(s) of Admission and Good Standing (if applicable)
- Payment: \$815.00 money order or certified bank check made payable to the Commonwealth of Massachusetts. No personal checks. All filing fees are non-refundable and non-transferable.

### **CHECKLIST:**

Before filing your complete application by the **December 15, 2006, deadline** at the address below, check the following:

#### **BE CERTAIN THAT YOU HAVE:**

- Provided full and complete details when asked.
- Fully answered each and every question, including dates, when asked.
- Responded with a written "yes" or "no" answer to each question calling for a "yes" or "no" answer.
- Attached **typed** rider pages for applicable questions and included your name and signature on those rider page(s).
- Signed all pages requiring your signature.
- If applicable, mailed the Nonstandard Testing Accommodations Application separately to the Board of Bar Examiners.
- If applicable, mailed the Springfield Form to the Board of Bar Examiners and have not attached it to your bar application.
- ENCLOSED ALL OF THE NECESSARY DOCUMENTS AS LISTED ABOVE.

### File the complete application by December 15, 2006, at:

Supreme Judicial Court for Suffolk County Clerk Maura S. Doyle's Office One Pemberton Square John Adams Courthouse – Suite 1300 Boston, MA 02108-1707

Incomplete applications will not be accepted for filing and will be returned.

# Commonwealth of Massachusetts Board of Bar Examiners

# INFORMATION ABOUT THE MASSACHUSETTS BAR EXAMINATION \*\*\*Keep This Information for Future Reference\*\*\*

### SUBJECTS TESTED UNDER RULE 3:01, SECTION 3

Applicants will be expected to be familiar with the law in the following fields:

Agency
Business Organizations
Constitutional Law
Contracts
Criminal Law
Descent & Distribution of Estates
Domestic Relations
Evidence (including Federal Rules)
Federal Jurisdiction

Federal Rules of Civil Procedure Mass. Rules of Civil Procedure Professional Responsibility Real Property (incl. Mortgages) Torts

Trusts Unfair or Deceptive Practices (G.L.c. 93A) Uniform Commercial Code (Articles 1-9) Wills

### **MBE**

On Wednesday, February 28, 2007, (8:30 a.m. – {approx.} 4:30 p.m.), the examination will consist of the Multistate Bar Examination (MBE). The applicant will be furnished printed statements of facts, consisting of 200 questions, composed by a committee chosen by the National Conference of Bar Examiners. To each question, four alternative answers, prepared by the same committee, will be furnished. The applicant will be asked to choose the "best" answer. Scores will be based on the number of questions answered correctly. The total possible raw score on the examination is two hundred.

The Multistate Bar Examination will cover the fields of Constitutional Law, Contracts, Criminal Law, Evidence, Real Property and Torts, but these will not be grouped or identified by subject matter.

The National Conference of Bar Examiners (NCBE) has published an MBE information booklet which is available on their web site: <a href="www.ncbex.org">www.ncbex.org</a>. Study aids containing sample MBE questions may be ordered through this booklet.

If you plan to sit **concurrently** and your MBE state is Massachusetts, you must complete the form that will arrive with your seating assignment authorizing Massachusetts to transfer your score. **The cost to transfer your MBE score is \$25.00 (bank check or money order made payable to the Commonwealth of Massachusetts – no personal checks accepted).** If you plan to sit concurrently and your MBE state is <u>NOT</u> Massachusetts, it is <u>your responsibility</u> to make arrangements with your MBE state to have your MBE score transferred to Massachusetts. <u>Failure to do so may result</u> in a delay in receipt of your scores and/or a delay in your admission.

### **ESSAY**

On Thursday, March 1, 2007, (8:30 a.m. – {approx.} 4:30 p.m.), the essay portion of the examination will consist of ten (10) questions based on statements of facts, each calling for an "essay" type answer. The statements will be based on some or all of the fields of law set forth in the section entitled "Subjects Tested Under Rule 3:01, section 3."

### \*\*RETAIN FOR FUTURE REFERENCE\*\*

CIVIL NO. SUFFOLK, SS.

IN THE MATTER OF
(Type or Legibly Print Name)
PETITION
FOR ADMISSION TO THE BAR OF THE COMMONWEALTH
(REAPPLICATION)
Petition filed(Court Use Only)

Supreme Judicial Court For Suffolk County

### PETITION FOR ADMISSION TO THE BAR OF THE COMMONWEALTH OF MASSACHUSETTS

Type or Legibly Print Full Name  Commonwealth. I represent that I am of good moral character and over the age of eighteen years, having been be commonwealth. I represent that I be examined for admission as an attorney and, if found qualified dmitted as such.    Signed:	I,	,	hereby petition for	admissi	on to the bar of the	
	Ty	ype or Legibly Print Full Name				
Signed:	Commonwealth	. I represent that I am of good mo	ral character and o	over the	age of eighteen years,	having been bor
Signed:		I request that I b	e examined for a	lmission	as an attorney and, i	f found qualified
Signed:	ndmitted as such	1				
Address:			C: am a de			
City   State   Zip			Signeu:		Applicant's Signatu	re
City   State   Zip			Address			
Email address (if applicable)  Date:    Date:						
Date:				City	State	Zip
RECOMMENDATION OF A MEMBER OF THE BAR OF THE COMMONWEALTH OF MASSACHUSE OR OF ANY STATE, DISTRICT OR TERRITORY OF THE UNITED STATES (Supreme Judicial Court Rule 3:01, subsection 1.2)  I,, an attorney of the bar of, Type or Legibly Print Full Name espectfully recommend that the foregoing petition be granted, and certify that the petitioner is of good moral haracter.  Attorney's Signature: Business Address: elephone Number: Date:				E	mail address (if applica	able)
RECOMMENDATION OF A MEMBER OF THE BAR OF THE COMMONWEALTH OF MASSACHUSE OR OF ANY STATE, DISTRICT OR TERRITORY OF THE UNITED STATES (Supreme Judicial Court Rule 3:01, subsection 1.2)  I,, an attorney of the bar of, Type or Legibly Print Full Name espectfully recommend that the foregoing petition be granted, and certify that the petitioner is of good moral haracter.  Attorney's Signature: Business Address: elephone Number: Date:			Date:			
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elephone Number: Date:		Attorney's Signature:				
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### THE COMMONWEALTH OF MASSACHUSETTS

SUFFOLK, SS.

Supreme Judicial Court For Suffolk County

By examination to be held	In the matt	er of(Applicant for admiss	ion as an attor	rney at law)
APPLICANT'S SUPPLEMENTARY STATEMENT TO THE BOARD OF BAR EXAMINITATION  TYPE (no less than 12 point font) OR PRINT LEGIBLY USING ONLY BLAC  (a) Full Name:  First Middle Name or Initial Last  (b) Address  City State Zip Telephone No  (c) Place of birth Date of birth Date of birth  City and State (MM/DD/YY)  (d) Have you ever taken the Massachusetts Examination using a different name? Yes No  If yes, state all names, places and times:  When did you last SIT for the Massachusetts Bar Examination?  When did you last submit any form of application to the Massachusetts Bar?				
TYPE (no less than 12 point font) OR PRINT LEGIBLY USING ONLY BLACE  (a) Full Name:  First Middle Name or Initial Last  (b) Address  City State Zip Telephone No  (c) Place of birth Date of birth  City and State (MM/DD/YY)  (d) Have you ever taken the Massachusetts Examination using a different name? Yes No  If yes, state all names, places and times:  When did you last SIT for the Massachusetts Bar Examination?  When did you last submit any form of application to the Massachusetts Bar?			(Date)	
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First Middle Name or Initial Last  (b) Address  City State Zip Telephone No  (c) Place of birth Date of birth  City and State (MM/DD/YY)  (d) Have you ever taken the Massachusetts Examination using a different name? Yes No  If yes, state all names, places and times:  When did you last SIT for the Massachusetts Bar Examination?  When did you last submit any form of application to the Massachusetts Bar?	<b>TYPE (no less tha</b>	n 12 point font) OR PRINT	LEGIBLY U	JSING ONLY BLACK I
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When did you last <u>SIT</u> for the Massachusetts Bar Examination?  When did you last submit any form of application to the Massachusetts Bar?  ONOTE: THIS INCLUDES ANY EXAMINATION FROM WHICH YOU WERE ARSENT.				
	When did you last <u>SIT</u>	for the Massachusetts Bar Examin	ation?	
(NOTE: THIS INCLUDES ANY EXAMINATION FROM WHICH YOU WERE ABSENT)				
Are you taking the Multistate Bar Examination in a different jurisdiction in connection (concurrent) application?	, .	ion?		risdiction in connection with
YES NO		YES	NO	

See next page for further information on concurrent applications.

You must sit in the jurisdiction which you indicate. If your answer to #4 is any jurisdiction other than Massachusetts, you will be seated for one (1) day only (Thursday), for the essay portion of the examination. CAVEAT: NO CHANGE IN THE CHOSEN MBE JURISDICTION WILL BE PERMITTED AFTER FILING THIS APPLICATION IN THE SUPREME JUDICIAL COURT, CLERK'S OFFICE FOR SUFFOLK COUNTY. SEATING ASSIGNMENTS WILL BE MADE ONLY IN ACCORDANCE WITH APPLICANT'S ANSWER TO #4. If you are sitting concurrently, but taking the MBE in a jurisdiction other than Massachusetts, it is YOUR RESPONSIBILITY to have the jurisdiction in which you are taking the MBE transfer your score to Massachusetts.

Name of Employer and Position Held (DO NOT ABBREVIATE)  Address (INCLUDE city, state, zip code, and telephone number.)  Have you ever made application in any other jurisdiction or court other than Massachusetts (this should in application for reinstatement and any applications subsequently withdrawn, as well as concurrent application admitted to practice law?  If you answered NO to #7, continue to #8. If you answered YES, complete the following:  Name jurisdictions and courts other than Massachusetts in which you have applied (this should include a for reinstatement and any applications subsequently withdrawn) or been admitted to practice law. Give diapplication and admission to practice (if applicable), or disposition (do not leave blank or answer "n/a! Attach a certificate (dated within 90 days of this application) evidencing your admission and good s from each state to which you are admitted to practice law.  (a) Date of Application  (b) Jurisdiction (include Court) (c) Date of Admission/Disposition		Name		Address	
Address (INCLUDE city, state, zip code, and telephone number.)  Have you ever made application in any other jurisdiction or court other than Massachusetts (this should in application for reinstatement and any applications subsequently withdrawn, as well as concurrent application admitted to practice law?  If you answered NO to #7, continue to #8. If you answered YES, complete the following:  Name jurisdictions and courts other than Massachusetts in which you have applied (this should include a for reinstatement and any applications subsequently withdrawn) or been admitted to practice law. Give dapplication and admission to practice (if applicable), or disposition (do not leave blank or answer "n/a" Attach a certificate (dated within 90 days of this application) evidencing your admission and good s from each state to which you are admitted to practice law.  (a) Date of Application  (b) Jurisdiction (include Court)  (c) Date of Admission/Disposition	Dates of Attendance: From:	To:	Deg	ree Awarded	
Address (INCLUDE city, state, zip code, and telephone number.)  Have you ever made application in any other jurisdiction or court other than Massachusetts (this should in application for reinstatement and any applications subsequently withdrawn, as well as concurrent applications admitted to practice law?  If you answered NO to #7, continue to #8. If you answered YES, complete the following:  Name jurisdictions and courts other than Massachusetts in which you have applied (this should include a for reinstatement and any applications subsequently withdrawn) or been admitted to practice law. Give dapplication and admission to practice (if applicable), or disposition (do not leave blank or answer "n/a" Attach a certificate (dated within 90 days of this application) evidencing your admission and good s from each state to which you are admitted to practice law.  (a) Date of Application  (b) Jurisdiction (include Court)  (c) Date of Admission/Disposition	Current Employer and Position	on Held:			
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for reinstatement and any applications subsequently withdrawn) or been admitted to practice law. Give dapplication and admission to practice (if applicable), or disposition (do not leave blank or answer "n/a"  Attach a certificate (dated within 90 days of this application) evidencing your admission and good sequenced from each state to which you are admitted to practice law.  (a) Date of Application  (b) Jurisdiction (include Court)  (c) Date of Admission/Disposition	If you answered NO to #7, co	ontinue to #8. If you answ	wered YES, co	nplete the following:	
(a) Date of Application (b) Jurisdiction (include Court) (c) Date of Admission/ <b>Dispositio</b>	for reinstatement and any application and admission to p	ications subsequently with ractice (if applicable), or <u>c</u>	drawn) or been lisposition (do	admitted to practice law. Give dates not leave blank or answer "n/a").	
11	Attach a certificate (dated w	are admitted to practice	<u>e law</u> .		
(i.e. failed, withdrew, pending, etc					

You must respond to all questions by writing "yes" or "no" in the space provided. "N/A" is not an acceptable answer. For affirmative answers, attach a typewritten 8 ½ by 11 sheet(s) of paper which provides full details on the matter. 8. Have you ever been reprimanded, sanctioned, disciplined, suspended or expelled from a college, university or law school? \_\_\_\_\_\_. If yes, state the facts fully, including date(s), and attach a copy of the record from the school's disciplinary committee. 9. Have you ever been disbarred, suspended, reprimanded, censured, admonished or otherwise disciplined or (a) disqualified as an attorney, or as a member of any other profession, or as a holder of any public office? If yes, state the dates, the details and the name and address of the authority in possession of the record thereof and attach a copy of the record. Have any charges or complaints been made concerning your conduct as an attorney, or (b) as a member of any profession, or as a holder of any public office? If yes, state the dates, the details and the name and address of the authority in possession of the record thereof and attach a copy of the record. 10. Are there any unsatisfied judgments or court orders of continuing effect against you? If yes, state the facts fully below, giving names and addresses of creditors, amounts, dates, and the nature of debts, judgments or court orders, and the reason for nonpayment of unsatisfied judgments or any noncompliance with court orders.

11. (a) Have you ever been charged with or been a subject of any investigation for a felony or misdemeanor other than a minor traffic charge? \_\_\_\_\_\_ If yes, state the dates, courts, details and results.

(b) Have you ever been a party on either side in a civil action or proceeding involving a claim of fraud, conversion, breach of fiduciary duty, professional malpractice or other wrongful conduct? \_\_\_\_\_\_ If yes, explain, including dates.

(c) Have you been a party in any other legal or administrative proceedings? \_\_\_\_\_\_ If yes, explain, including dates.

(d) Have you ever been adjudged bankrupt or insolvent? \_\_\_\_\_\_ If yes, explain, including dates.

If you have answered affirmatively to any of the above questions 8, 9(a), (b), 10, 11(a), (b), (c) and/or (d), you must attach a separate typewritten statement giving FULL DETAILS on the matter. Provide a narrative stating the facts, which includes the circumstances, the date(s), exact name and location of court, if any, and the dispositions of the matter. All case numbers and references to court records must be included; if no court records are available, give to the best of your ability the names and addresses of all persons involved, including counsel. Be sure that your NAME AND SIGNATURE are included on this statement. YOU MUST PROVIDE DETAILS EVEN IF YOU HAVE DONE SO IN A PRIOR APPLICATION.

12. When did you sit for the	Multistate Professional Re	esponsibility Examina	ation (MPRE)?	
MONTH AND YEA	AR			
13. Provide your MPRE score	e below (and attach a pho	tocopy of your MPR	E Score Report):	
Scaled Score				
I agree to inform the Supreme Ju answers that I have made on this practice of law in the Commonwe Supreme Judicial Court.  I, the applicant, certify that each wording of any question.	s application. I understandealth of Massachusetts, or a	d that this obligation until such time as my	shall continue until I am application is withdrawn	admitted to the or denied by the
<b>G</b>	day of			
(day)	day of	(month)	(year)	
Applicant's Signature				
Applicant's Name ( <u>Type or Print</u>	t Clearly)			

# Commonwealth of Massachusetts Board of Bar Examiners

### **AUTHORIZATION**

	and
	, having filed an application for admission to the bar
	hereby consent to have an investigation made as to my moral
character, professional reputation, and fi	tness for the practice of law.
I hereby authorize every person, firm, co	ompany, corporation, governmental agency, law enforcement
agency, court, bar association, or institut	ion having control of any documents or records regarding charges or
complaints filed against me, including a	ny complaints expunged by law, whether formal or informal, pending
or closed, or any other pertinent data to p	provide them to the Massachusetts Board of Bar Examiners.
Signature of Applicant:	
Dated:	